

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

ADDRESS (number and street)

CNA PLAZA - CORPORATE TAX (24S)

☐Check if different
than previously
reported. (ACC)

CHICAGO

IL

60685

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00078287

3. IS THIS
REPORT☐NEW
(N)**OR**☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☒April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2006

through

03

31

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Karen E. Melchert

Signature of Treasurer

Electronically Filed by Karen E. Melchert

Date

07

27

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2006		45484.92
(b) Cash on Hand at Beginning of Reporting Period	45484.92	
(c) Total Receipts (from Line 19)	11412.90	11412.90
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	56897.82	56897.82
7. Total Disbursements (from Line 31)	37302.88	37302.88
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	19594.94	19594.94
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

Report Covering the Period:

From:

M M
0 1D D
0 1Y Y Y Y
2 0 0 6

To:

M M
0 3D D
3 1Y Y Y Y
2 0 0 6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	440.02	440.02
(i) Itemized (use Schedule A)		
(ii) Unitemized	10972.88	10972.88
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	11412.90	11412.90
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡	11412.90	11412.90
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	11412.90	11412.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	11412.90	11412.90

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		52.88	52.88
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		52.88	52.88
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		18000.00	18000.00
24. Independent Expenditure (use Schedule E)		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees		0.00	0.00
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees (such as PACs)		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		0.00	0.00
29. Other Disbursements.....		19250.00	19250.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share		0.00	0.00
(ii) "Levin" Share		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		37302.88	37302.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		37302.88	37302.88

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	11412.90	11412.90
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11412.90	11412.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	52.88	52.88
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	52.88	52.88

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 14

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A. Full Name (Last, First, Middle Initial)

Daniel Auslander

Mailing Address CNA Plaza

City State Zip Code
 Chicago IL 60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.8123

Amount of Each Receipt this Period

100.00

Contribution

B. Full Name (Last, First, Middle Initial)

Larry Boysen

Mailing Address CNA Plaza

City State Zip Code
 Chicago IL 60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.02

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.8133

Amount of Each Receipt this Period

83.34

Contribution

C. Full Name (Last, First, Middle Initial)

Michael Fusco

Mailing Address CNA Plaza

City State Zip Code
 Chicago IL 60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.8161

Amount of Each Receipt this Period

90.00

Contribution

SUBTOTAL of Receipts This Page (optional)

273.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A. Full Name (Last, First, Middle Initial) Craig Mense			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6	
Mailing Address CNA Plaza			Transaction ID: SA11A1.8209	
City State Zip Code Chicago IL 60685		Amount of Each Receipt this Period 83.34		
FEC ID number of contributing federal political committee. C		Contribution		
Name of Employer CNA		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.02		
B. Full Name (Last, First, Middle Initial) Thomas Pontarelli			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6	
Mailing Address CNA Plaza			Transaction ID: SA11A1.8229	
City State Zip Code Chicago IL 60685		Amount of Each Receipt this Period 83.34		
FEC ID number of contributing federal political committee. C		Contribution		
Name of Employer CNA		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.02		

SUBTOTAL of Receipts This Page (optional)

166.68

TOTAL This Period (last page this line number only)

440.02

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

Full Name (Last, First, Middle Initial)

A. A Lot of People Who Support Jeff Bingaman

Mailing Address 110 B Eash Broad Shtreet

City Falls Church State VA Zip Code 22056

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

State: NM

District:

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.8299

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. BACK AMERICA'S CONSERVATIVES PAC (BAC PAC)

Mailing Address 704 FITZHUGH WAY

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.8287

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. CARPER FOR SENATE

Mailing Address 19 EAST COMMONS BLVD SECOND FLOOR

City NEW CASTLE State DE Zip Code 19720

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

State: DE

District: 00

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.8283

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

Full Name (Last, First, Middle Initial)

A. Coalition to Re-Elect Larry Taylor

Mailing Address PO Box 1208

City
FriendswoodState
TXZip Code
77549Purpose of Disbursement
Contribution

Candidate Name

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District: 24

Transaction ID: SB23.8292

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	2	/	2	0	0	6

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Friends of Congressman Danny K. Davis

Mailing Address PO Box 51267

City
ChicagoState
ILZip Code
60651Purpose of Disbursement
Contribution

Candidate Name

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 07

Transaction ID: SB23.8281

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	7	/	2	0	0	6

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Harold Ford Jr. for TennesseeMailing Address 209 10th Avenue South,
Suite 229City
NashvilleState
TNZip Code
37203Purpose of Disbursement
Contribution

Candidate Name

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 09

Transaction ID: SB23.8289

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	2	/	2	0	0	6

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

Full Name (Last, First, Middle Initial)

A. HASTERT FOR CONGRESS COMMITTEE

Mailing Address P. O. Box 625
PO BOX 625

City Batavia State IL Zip Code 60510

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: IL District: 14

Disbursement For:
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.8291

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. JUDY BIGGERT FOR CONGRESS

Mailing Address P.O. Box 637

City Hinsdale State IL Zip Code 60522

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: IL District: 13

Disbursement For:
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.8301

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. MIKE DEWINE FOR US SENATE

Mailing Address PO BOX 340188

City COLUMBUS State OH Zip Code 43234

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

State: OH District: 00

Disbursement For:
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.8284

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 / 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

Full Name (Last, First, Middle Initial)

A. TOM FEENEY FOR CONGRESS

Mailing Address 1420 Alafaya Trail #103

City
Oviedo

State
FL

Zip Code
32765

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: FL District: 24

Disbursement For:
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.8303

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

18000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 / 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

Full Name (Last, First, Middle Initial)

A. Committee to Elect Blessing (Louis)

Mailing Address 3153 McGill Lane

City Cincinnati State OH Zip Code 45251

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.8308

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

B. Committe to Elect Rep. Willamowski

Mailing Address 730 W. North Street

City Lima State OH Zip Code

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.8306

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

C. Cupp for Supreme Court

Mailing Address 500 S. Front Street
Suite 700

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.8313

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5500.00

SUBTOTAL of Disbursements This Page (optional)

6250.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

Full Name (Last, First, Middle Initial)

A. Husted for State Representative

Mailing Address 148 Sherbrooke Drive

City Kettering State OH Zip Code 45429

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.8305

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. Ohioans for Justice O'Donnell

Mailing Address 10 West Broad Street
Suite 900

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.8312

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5500.00

Full Name (Last, First, Middle Initial)

C. Rendell for Governor

Mailing Address 123 S. Broad Street

City Philadelphia State PA Zip Code 19109

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.8288

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

Full Name (Last, First, Middle Initial)

A. Sietz for State Representative

Mailing Address 4401 Abby Court

City Cincinnati State OH Zip Code 25248

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.8310

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Texans for Alan Waldrop

Mailing Address PO Box 684235

City Austin State TX Zip Code 78768

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.8297

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Texans for Greg Abbot

Mailing Address PO Box 308

City Austin State TX Zip Code 78767

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.8295

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

19250.00